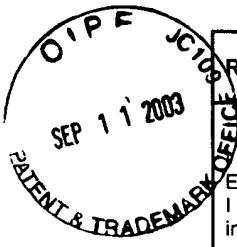


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## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

KC001.RE

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.  
 I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 6,286,240, granted 9/11/2001 and for which a reissue patent is sought on the invention entitled SAFETY DEVICE FOR FIREARMS.

the specification of which

 is attached hereto. was filed on \_\_\_\_\_ as reissue application number \_\_\_\_\_and was amended on \_\_\_\_\_  
(If applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/02B (or equivalent) listing the foreign applications.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

 by reason of a defective specification or drawing. by reason of the patentee claiming more or less than he had the right to claim in the patent. by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

The patent was issued with three claims, none of which covers certain features the applicant deems important to the invention.

Among the features applicant wishes to capture are the ability to operate the firearm when there is no power to the microprocessor.

[Page 1 of 2]

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/81 (07-03)

Approved for use through 01/31/2004. GPO: 0681-0033  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Docket Number (Optional)

KC001.RE

## (RE)ISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:

 Customer Number: \_\_\_\_\_

or

|   |                      |  |  |
|---|----------------------|--|--|
| <input checked="" type="checkbox"/> Firm or Individual Name | Alfred F. Hoyte, Jr. |  |  |
|---|----------------------|--|--|

|         |                       |  |  |
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| Address | 733 15th Street, N.W. |  |  |
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|         |           |  |  |
|---------|-----------|--|--|
| Address | Suite 700 |  |  |
|---------|-----------|--|--|

|      |            |       |    |     |       |
|------|------------|-------|----|-----|-------|
| City | Washington | State | DC | Zip | 20005 |
|------|------------|-------|----|-----|-------|

|         |  |  |  |  |  |
|---------|--|--|--|--|--|
| Country |  |  |  |  |  |
|---------|--|--|--|--|--|

|           |     |  |  |  |  |
|-----------|-----|--|--|--|--|
| Telephone | Fax |  |  |  |  |
|-----------|-----|--|--|--|--|

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name) KENNETH RAY COLLINS

|                      |      |
|----------------------|------|
| Inventor's signature | Date |
|----------------------|------|

|           |             |
|-----------|-------------|
| Residence | Citizenship |
|-----------|-------------|

|                 |                     |
|-----------------|---------------------|
| Mailing Address | Columbus, GA. 31907 |
|-----------------|---------------------|

Full name of second joint inventor (given name, family name)

|                      |      |
|----------------------|------|
| Inventor's signature | Date |
|----------------------|------|

|           |             |
|-----------|-------------|
| Residence | Citizenship |
|-----------|-------------|

Mailing Address

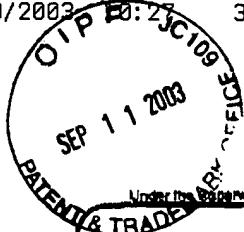
Full name of third joint inventor (given name, family name)

|                      |      |
|----------------------|------|
| Inventor's signature | Date |
|----------------------|------|

|           |             |
|-----------|-------------|
| Residence | Citizenship |
|-----------|-------------|

Mailing Address

Additional joint inventors or legal representative(s) not named on separately numbered sheets from PTO/SB/02A or 02B are attached hereto.



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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

PTO/SB/01 (06-03)  
Approved for use through 11/30/2005. OMB 0651-0036  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

|                         |                            |
|-------------------------|----------------------------|
| Application Number:     | Patent No. 6,286,240       |
| Filing Date:            |                            |
| First Named Inventor:   | Collins                    |
| Type:                   | SAFETY DEVICE FOR FIREARMS |
| Art Unit:               |                            |
| Examiner Name:          |                            |
| Attorney Docket Number: | KC001 RE                   |

I hereby appoint:

Practitioner(s) or Customer Number:

OR

Practitioner(s) named below:

| Name                 | Registration Number |
|----------------------|---------------------|
| Alfred F. Hoyte, Jr. | 33,612              |
|                      |                     |
|                      |                     |
|                      |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

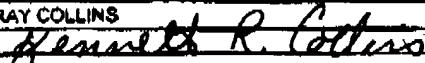
|                                     |                          |                      |              |
|-------------------------------------|--------------------------|----------------------|--------------|
| <input checked="" type="checkbox"/> | Firm or Individual Name: | Alfred F. Hoyte, Jr. |              |
| Address:                            | 733 15th Street, N.W.    |                      |              |
| Address:                            | Suite 700                |                      |              |
| City:                               | Washington, D.C.         | State:               | D.C.         |
| Country:                            | USA                      |                      |              |
| Telephone:                          | 202-737-7590             | Fax:                 | 202-737-7593 |

As the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06)

SIGNATURE of Applicant or Assignee of Record

|            |   |            |              |
|------------|---|------------|--------------|
| Name:      | KENNETH RAY COLLINS   |            |              |
| Signature: |  |            |              |
| Date:      | 9/11/2003   | Telephone: | 334-297-9579 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.34 and 1.35. The information is required to obtain or retain a benefit by the public when it files (and by the USPTO process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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